COUNTY OF IMPERIAL
PUBLIC HEALTH DEPARTMENT

September 24, 2021

HEALTH ADVISORY

Increase in Respiratory Virus Activity

Respiratory viruses other than SARS-CoV-2 virus are currently circulating in Imperial County and throughout California. These include rhinovirus, enterovirus, parainfluenza and respiratory syncytial virus. To date, no confirmed cases of influenza have been reported.

These viruses are contagious, have symptoms similar to COVID-19, and are spread by coughing, sneezing and close personal contact.

Respiratory syncytial virus (RSV) is the most common cause of bronchiolitis and pneumonia in infants and a cause of severe disease in adults older than 65 year of age. Due to increased inter-seasonal RSV activity, the Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) encourage clinicians to consider testing for RSV in patients with respiratory symptoms, especially those who test negative for SARS-CoV-2.

RSV typically circulates during the winter months and usually less than 1% of respiratory illness specimens in California test positive for RSV during the summer months. RSV activity has been high for the past weeks in California and continues to increase, with 8.8% of specimens testing positive during the week ending September 18, 2021. In addition, CDPH has reported the circulation of other respiratory viruses such as parainfluenza types 1-4 and rhinovirus/enterovirus. RSV and other respiratory viruses have been detected in Imperial County.

Older infants and toddlers may be at increased risk of severe RSV-associated illness due to likely reduced exposure to RSV during the winter months of 2020-2021. In infants younger than six

months, RSV infection may result in symptoms of irritability, poor feeding, lethargy, and/or apnea with or without fever. In older infants and young children, rhinorrhea and decreased appetite may appear one to three days before cough, often followed by sneezing, fever, and sometimes wheezing. Symptoms in adults are typically consistent with upper respiratory tract infections, including rhinorrhea, pharyngitis, cough, headache, fatigue, and fever.

Clinicians should consider testing patients with a negative SARS-CoV-2 test and acute respiratory illness or the age-specific symptoms presented above for non-SARS-CoV-2 respiratory pathogens, such as RSV. Real-time reverse transcription-polymerase chain reaction (rRT-PCR) is the preferred method for testing for respiratory viruses.

Resources:

Interim Guidance for Use of Palivizumab Prophylaxis to Prevent Hospitalization from Severe Respiratory Syncytial Virus Infection During the Current Atypical Interseasonal RSV Spread

Updated Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection

Changes in Influenza and Other Respiratory Virus Activity During the COVID-19 Pandemic – United States, 2020-2021

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